## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together will applicable fee(s), to: Mail Mail Stop ISSUL AEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate, All further correspondence including the Fatent, advance orders and notification of maintenance fees will be mailed to the durent correspondence address are indicated unless corrected below or directed otherwise in Block I, by 0, specifying a new correspondence address and or 0, bindering a separate "FEE ADDRESS" for maintenance fee notifications.

CLIEBERT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23579 2590 02/22/2011 Pabst Patent Group LLP 1545 PEACHTREE STREET NE SUITE 320 ATLANTA, GA 30309

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being fassimile transmitted to the USFTO (571) 273-2885, on the date indicated below.

(Depositor's name) (Signature) (Date

TOTAL FRE(S) DUE

DATE DUE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/782,750	02/19/2004	Joseph P. Vacanti	CMCC450DIVREI	5014
title of invention: engineering of strong, pliable tissues				

PUBLICATION FEE DUE PREV. PAID ISSUE FEE

ISSUE FEE DUE SMALL ENTITY APPLN. TYPE 05/23/2011 \$755 \$0 en \$755 nonprovisional YES CLASS-SUBCLASS ARTIBIT EXAMINER 3774 623-002120 ISABELLA, DAVID J Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Pabst Patent Group LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents, if no name is listed, no name will be printed. "Foe Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CPK 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Boston, Massachusetts Children's Medical Center Corporation Pleaso check the appropriate assignee category or categories (will not be printed on the patent): 🗋 Individual 🔟 Corporation or other private group entity 📮 Government 4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted:

A check is enclosed. Issue Foe Payment by credit card. Form PTO-2038 is attached. Dublication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3129 (enclose an extra copy of this fo Advance Order - # of Copies \_ (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the recognise of the United States Potest and Trademark Office.

May 13, 2011 Authorized Signature 45,315 Charles Vorndran, Ph.D., J.D. Registration No. Typed or printed name

This collection of information is required by 37 CFR 1,311. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentiality is giverned by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete, including publicity, preparing, and administing the completed application from the USFTO to process administing the completed application from the USFTO to process administing the completed application from the USFTO to the USFTO to

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CMCC 450 DIV REI